

READY READER

Kansas CMS Emergency Preparedness CoP Newsletter

Issue 7 March 2017

Incident After Action Reports

Recent events in central and western Kansas involving large grass fires illustrate the importance of having in-place solid plans for emergency situations. During the week of 3-6-17 strong winds fueled large grass fires destroying thousands of acres of prairie, agriculture, property and livestock and at the loss of at least one human life. Also, these events sparked the need to evacuate health care facilities. Reflecting backwards on the process of the facilities that needed to evacuate it may be helpful to think backwards as we move forward in preparing emergency preparedness plans. For instance, in the case of recent evacuations it is helpful to think of preparing an after-action report (AAR) and in so doing one might keep the following in mind. While not an exhaustive list and not necessarily agency specific it provides a framework for developing a report which can help guide preparation planning.

- Communications: How and by whom you were notified of the need to evacuate. Include the manner in which you communicated this to your staff, patients and family members of patients.
- Staff and patient census (if applicable) at the time of the evacuation.
- By what means of transport patients were evacuated.
- Where patients were evacuated to and, if more than one evacuation point of destination was used, how many patients went to different evacuation points. Also here please show how patient accountability was established (head count) and how that was maintained.
- Local agencies that assisted in the evacuation.
- Difficulties/barriers encountered during the evacuation.
- The manner in which facility systems came back on-line and the date/time of these.
- Any systems that were affected by the event. As an example, in the case of the recent grass-fires one should be sure to include a discussion about any HVAC or filter issues that may have arisen and if so how they were mitigated. Also, if there were any water issues that may have arisen at the facility due to local firefighting efforts.
- A discussion reflecting on your experience and any thoughts to improve the process for any future such occurrences (lessons learned).
- Any information you think would be helpful or important to note.

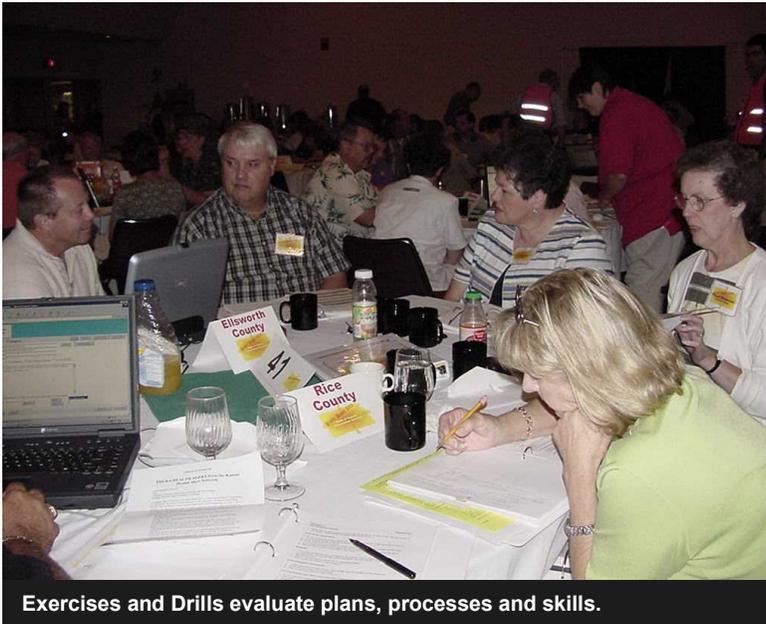
When used correctly after action reports can be used to analyze the management or response to an incident, exercise or event by identifying strengths to be maintained and built upon, as well as identifying potential areas of improvement. After action reports can be used by any facility type to assist in future planning and preparation. (Continued on page 4)

“This final rule issues emergency preparedness requirements that establish a comprehensive, consistent, flexible, and dynamic regulatory approach to emergency preparedness and response that incorporates lessons learned...”

- Federal Register, 9/16/2016

In This Issue

- Incident After Action Reports
- Facility Exercises & Drills
- Common Exercise Objectives
- Learning About Exercises



17 Provider Types

There are 17 provider types that are affected by this rule. They are:

- Hospitals
- Religious Nonmedical Health Care Institutions
- Ambulatory Surgical Centers
- Hospices
- Psychiatric Residential Treatment Facilities
- Programs of All-Inclusive Care for the Elderly
- Transplant Centers
- Long-Term Care Facilities
- Intermediate Care Facilities for Individuals with Intellectual Disabilities
- Home Health Agencies
- Comprehensive Outpatient Rehabilitation Facilities
- Critical Access Hospitals
- Clinics, Rehabilitation Agencies, and Public Health Agencies as Providers of Outpatient Physical Therapy and Speech-Language Pathology Services
- Community Mental Health Centers
- Organ Procurement Organizations
- Rural Health Clinics and Federally Qualified Health Centers
- End-State Renal Disease Facilities

Facility Exercises & Drills

Most if not all the facilities and organizations covered by the new emergency preparedness conditions of participation are required to participate in a community full-scale exercise and complete one other exercise or drill. It is strongly recommended that facilities and organizations contact their county emergency manager to engage in these community exercises and other emergency planning activities.

As it relates to exercises, the Homeland Security Exercise and Evaluation Program (HSEEP) developed by the Federal Emergency Management Agency (FEMA) outlines processes for communities and organizations to utilize to evaluate their emergency preparedness plans and skills in a coordinated objective manner. A key concept of this exercise planning method is the identification of objectives for each agency participating in the exercise. This is also considered one of the initial exercise planning activities and is typically performed prior to the identification of a scenario.

As your facility or organization engages with emergency management or other partners for exercise development, consider what objectives you wish to evaluate. You may wish to evaluate your ability to medically surge for additional patients with specific types of injuries, or evaluate your ability to communicate with patients and response partners during an incident using primary and secondary communications methods. Remember, prior exercise planning and objective identification will give you the best exercise.

Kansas Health Alert Network

The Kansas Health Alert Network (KS-HAN) is an internet-based, secure, emergency alerting system that allows general public health and emergency preparedness information to be shared rapidly.

KS-HAN has the ability to alert registrants by organization, occupation, county, or group through e-mail, work and cell phone, and SMS text.

Since KS-HAN is the primary system used by KDHE for communication during an emergency, it is important to ensure that your organization's registrants and their contact information are kept updated.

KS-HAN is an invitation-only system. To request an invite code or for technical assistance, e-mail your name, organization, phone number, and employer to the KS-HAN Administrator at kdhe.kshanadmin@ks.gov

You will receive an invite code by e-mail that you will be required to enter, along with your e-mail address, during registration.

Common Exercise Objectives

The new emergency preparedness conditions of participation and incident experience can provide use with some common exercise objectives that cross all 17 provider types. These challenges and exercise opportunities can be utilized to help all organizations improve their ability to respond to an emergency and to coordinate with their community emergency response partner organizations.

Below we will outline some common exercise objectives that can cross most if not all provider types:

- Evaluate the organization's/facility's ability to identify emergency needs and activate the emergency plan.
- Evaluate the organization's/facility's ability to provide patient or resident information to evacuation locations or other care providers to assure the continuity of care.
- Evaluate the organization's/facility's ability to communicate with staff and providers concerning the status of the organization/facility and provide those individuals with specific response activities.
- Evaluate the organization's/facility's ability to provide information about the organization's/facility's needs to the county incident command or emergency operations center.
- Evaluate the staff's ability to implement patient triage, treatment and transport per organizational policies and procedures.
- Evaluate the organization's/facility's ability to provide public information statements and communications in association with community emergency response agencies within the joint information system.
- Evaluate the organization's/facility's ability to document incident response activities including attempts to contact and coordinate with community emergency preparedness officials?
- Evaluate the organization's/facility's ability to identify services that may need to be temporarily suspended due to incident impacts or activities?
- Evaluate the organization's/facility's ability to identify volunteer skills needed and process to accept volunteer assistance.

Exercises and drills provide an opportunity to validate processes, plans, and staff skills. Through identification of appropriate exercise objectives, your facility can make the most of any exercise opportunity to validate these items and identify gaps to plan or gain supplies for.

Learning About Exercises

Designing an exercise is a skill and there are a number of training opportunities to learn about exercise elements. Kansas TRAIN is an on-line learning management system which offers many different classes and trainings including training on exercise design. The following are exercise related trainings and courses available via Kansas TRAIN.

For those preferring on-line training opportunities:

- IS-130 Exercise Evaluation and Improvement Planning—1011883
- Exercise Evaluator Training
- How to use the Exercise Evaluation Toolkit

For those of you who like in-person training sessions:

- Kansas Exercise Design Course for Discussion-Based Exercises (KS-132)
- Kansas Exercise Design Course for Operations-Based Exercises (KS-133)

To learn more about Kansas TRAIN as a user of the Learning Management System, [click here](#). To register for live trainings, exercises, or online courses, visit the Kansas TRAIN website at <https://ks.train.org/>. Questions can be directed to the Kansas TRAIN staff at 785-296-0425 or email kdhe.kstrain@ks.gov.

County emergency managers across Kansas are also well versed in exercise design and conducting of exercises. These may also be the same people helping to coordinate and design the community full-scale exercises that are discussed in the emergency preparedness conditions of participation rule. To find out who is your county's emergency manager and get their contact information please visit <http://www.kansastag.gov/KDEM.asp?PageID=200>.

Incident After Action Reports

AARs are intended to be used as a tool by departments, agencies, and organizations. An ARR provides analysis for lessons learned, best practices and recommendations for future planning, training, and exercise development. As improvement actions are identified and addressed, it is important that any relevant plans, policies and procedures are updated accordingly.

AAR template sample can be found at: <http://www.uh.edu/emergency-management/planning-and-response/after-action-report/> or <http://www.kdhe-exercises.org/CommonFiles/AfterActionReport.doc>.

Contact Us

KDHE Health Facilities
P—785.296.0131
Jim.Perkins@ks.gov

KDHE Preparedness
P-785.296.7100
KDHE.Preparedness@ks.gov

Kansas Division of Emergency Management
Bryan.D.Murdie.nfq@mail.mil

Kansas Department on Aging and Disability Services
Denise.German@ks.gov

Office of the State Fire Marshal
Brenda.McNorton@ks.gov

Kansas Hospital Association
P— 785.276.3125
rmmarshall@kha-net.org

Kansas Home Care Association
P— 785.478.3640
khca@kshomecare.org

Centers for Medicare & Medicaid Services
victoria.vachon@cms.hhs.gov

Accessibility Issues
P— 785.296.1389
Anthony.Fadale@ks.gov

Kansas Health Care Association
P— 785.267.6003
khca@khca.org